PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

10764746

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OF			OTHER THAN SMALL ENTITY			
TOTAL CLAIMS			. 36			•		RATE	FEE	7	RATE	FEE ·		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			36 minus 20=		. 16			X\$ 9=		OR	XS18=	288		
INE	DEPENDENT C	LAIMS	2_m	inus 3 =	• •			X43=		OR	X86=			
ML	JLTIPLE DEPEN	NDENT CLAIM P	RESENT					÷145=		OR	÷290≥			
• If	the difference	in column 1 is	ero. enter	"0" in c	olumn 2		TOTAL		OR	TOTAL	1058			
CLAIMS AS AMENDED - PART II									<u> </u>	,	OTHER			
·		(Column 1)				(Column 3)		SMALL	ENTITY	OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BEA USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 24	Minus		6			XS 9=		OR	X\$18=	//		
	Independent	NTATION OF MI	Minus	S		= -		X43=		OR	X86=	1		
<u> </u>	FIRST PRESE	INTATION OF ME	JETIPLE DE	PENUENI	CLAIM		۱ [+145=		OR	+290=			
		•	•					TOTAL		OR	TOTAL ADDIT, FEE			
ADDIT FEE ADDI (Column 1) (Column 2) (Column 3)											ADDII. FEET			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**		= .		XS 9=		OR	X\$18=			
	Independent	• NTATION OF MU	Minus	ENDENT	C1 A11A	-		X43=		OR	X86=			
	rinoi Pricoc	NIAHON OF MU	LIPLE DEP	ENDENT	CLAIM	ليا	ן י	+145=		OR	+290=			
	•					•	L	TOTAL DDIT, FEE	•	OR	TOTAL ADDIT, FEE			
		(Column 1)		(Colum	n 2)	(Column 3)	_							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**		3		X\$ 9=		OR	X\$18=			
AME	Independent	•	Minus	***		<u> </u>		X43=		OR	X86=			
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM			+145=			+290=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.														
	f the "Highest Nur	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE Total OR TOTAL ADDIT. FEE Total OR ADDIT. FEE Total OR ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE Total OR ADDIT. FEE ADDIT. FEE Total OR ADDIT. FEE ADDIT. FEE Total OR ADDIT. FEE ADDIT. FEE												